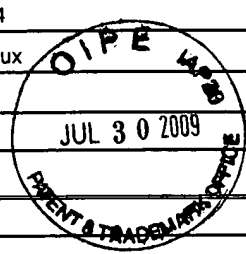
 TRANSMITTAL FORM (To be used for all correspondence after initial filing)		Application Number		10/801,930	
		Filing Date		March 16, 2004	
		First Named Inventor		Severine Catreux	
		Art Unit		2611	
		Examiner Name		Vlahos, Sophia	
		Attorney Docket Number		16136US02	
Total Number of Pages in This Submission		5			
ENCLOSURES (check all that apply)					
<input checked="" type="checkbox"/> Fee Transmittal Form (1 page, in duplicate) <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD		<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Notice of Appeal, 1 page, in duplicate) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Return-Receipt Postcard <input type="checkbox"/> Other Enclosure(s) (please identify below):	
		Remarks			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT					
Firm		McAndrews Held & Malloy, Ltd.			
Signature		/Michael T. Cruz/			
Printed Name		Michael T. Cruz, Reg. No. 44,636			
Date		July 27, 2009			
CERTIFICATE OF MAILING					
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on <u>July 27, 2009</u>					
Name (Print/type)		Michael T. Cruz		Registration No. (Attorney/Agent)	
Signature		/Michael T. Cruz/		Date	
				July 27, 2009	

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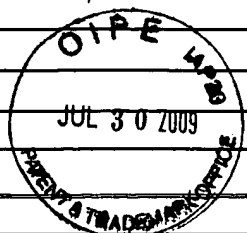
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SUBMITTED BY				
Signature	/Michael T. Cruz/	Registration No. (Attorney/Agent)	44,636	Telephone (312) 775-8000
Name (print/type)	Michael T. Cruz	Date	July 27, 2009	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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<p>4. OTHER FEE(S)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>Fee Paid(\$)</th> </tr> </thead> <tbody> <tr> <td>Non-English Specification, \$130 fee (no small entity discount)</td> <td>_____</td> </tr> <tr> <td>Other (e.g., late filing surcharge): <u>Notice of Appeal (\$540)</u></td> <td><u>\$540</u></td> </tr> </tbody> </table>					Fee Paid(\$)	Non-English Specification, \$130 fee (no small entity discount)	_____	Other (e.g., late filing surcharge): <u>Notice of Appeal (\$540)</u>	<u>\$540</u>																																																		
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SUBMITTED BY					
Signature	/Michael T. Cruz/	Registration No. (Attorney/Agent)	44,636	Telephone	(312) 775-8000
Name (print/type)	Michael T. Cruz	Date	July 27, 2009		

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